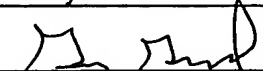


UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.	END-5240
(only for new nonprovisional applications under 37 CFR 1.53(b))		First Inventor	Robert J. Dunki-Jacobs et al.
		Title	METHODS AND DEVICES FOR DETECTING TISSUE CELLS
		Express Mail Label No.	ER 554 942 641 US
APPLICATION ELEMENTS <i>See MPEP Chapter 600 concerning utility patent application contents.</i>		ADDRESSED TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status.		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 42] (Preferred arrangement set forth below)		a. <input type="checkbox"/> Computer Readable Form (CRF)	
- Descriptive Title of the Invention		b. <input type="checkbox"/> Specification Sequence Listing on:	
- Cross Reference to Related Applications		i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
- Statement Regarding Fed sponsored R&D		ii. <input type="checkbox"/> paper	
- Reference to sequence listing, a table, or a computer program listing appendix		c. <input type="checkbox"/> Statement verifying identity of above copies	
- Background of the Invention		ACCOMPANYING APPLICATION PARTS	
- Brief Summary of the Invention		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
- Brief Description of the Drawings (if filed)		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)	
- Detailed Description		11. <input type="checkbox"/> English Translation Document (if applicable)	
- Claim(s)		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
- Abstract of the Disclosure		13. <input type="checkbox"/> Preliminary Amendment	
4. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 8]		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
5. Oath or Declaration [Total Pages 3]		15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
a. <input checked="" type="checkbox"/> Not executed (original or copy)		16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)		17. <input type="checkbox"/> Other	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: , filed . Prior application information: Examiner Group Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA			
20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Gerry S. Gressel. at: Telephone: (513) 337-3295 Fax: (732) 524-2808			
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Gerry S. Gressel	Reg. No. 34,342	
SIGNATURE			
DATE	November 14, 2003		



22783 U.S. PTO

FEE TRANSMITTAL

Complete if Known

Application Number	
Filing Date	November 14, 2003
First Named Inventor	Robert J. Dunki-Jacobs et al.
Group Art Unit	Not assigned
Examiner Name	Not assigned
Attorney Docket Number	END 5240

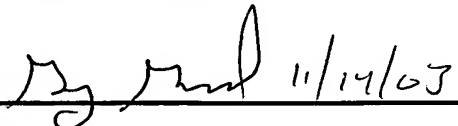
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	27 - 20 =	7	x 18.00	\$126 0.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 86.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$280.00	
			TOTAL FEES	\$ 896.00

METHOD OF PAYMENT

- ☒ Please charge Deposit Account No. 10-0750/END 5240/GSG in the amount of \$896.00.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ END 5240/GSG.

SUBMITTED BY:		<i>Complete (if applicable)</i>
Typed or Printed Name	Gerry S. Gressel	Reg. No. 34,342
Signature	 11/14/03	Date: November 14, 2003
		Deposit Account No. 10-0750